

9293 Harding Avenue Surfside, FL 33154 Tel# (305) 861-4863 Fax# (305) 861-1302

|                                 |                                      |              |  |      |                  |                              |          |       |                 |            | PERN | MIT NO | Э.   |       |
|---------------------------------|--------------------------------------|--------------|--|------|------------------|------------------------------|----------|-------|-----------------|------------|------|--------|------|-------|
|                                 |                                      |              |  |      |                  |                              |          |       | APPLICATION NO. |            |      |        |      |       |
|                                 |                                      | BUIL         | DINC   | i PI | ERMI             | ГΑ                           | PPLI     | CA    | ΓIO             | N          |      |        |      |       |
|                                 | 2007 FLORIDA BUILDING CODE IN EFFECT |              |  |      | AMOUNT DUE       |                              |          |       |                 |            |      |        |      |       |
| PERMIT TYPE: (Check one)        | Structur                             | al           | ☐ Med  | hani | cal              | ] Elec                       | ctrical  |       | ] Plun          | nbing      | □ O  | ther   | [    | Roof  |
| JOB ADDRESS:                    |                                      |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| OWNER'S NAME:                   |                                      |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| OWNER'S ADDRESS                 | S:                                   |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| CITY:                           |                                      |              | PHON   | E#   |                  |                              |          |       | FAX             | <b>.</b> # |      |        |      |       |
| FEE SIMPLE TITLE                | HOLDER'S                             | NAME         | :  |      |                  | AD                           | DRESS:   |       |                 |            |      |        |      |       |
| CONTACT PERSON                  | [ <b>:</b>                           |              |  |      |                  | PH(                          | )NE#     |       |                 |            |      |        |      |       |
| EMAIL ADDRESS:                  |                                      |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| CONTRACTING FIR                 | RM:                                  |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| MAIL ADDRESS:                   |                                      |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| CITY:                           |                                      |              | STATE  | ]    |                  |                              |          |       | ZIP             | CODE:      |      |        |      |       |
| PHONE #                         |                                      |              | FAX#   |      |                  |                              |          |       |                 | AIL:       |      |        |      |       |
| CERT COMPETENC                  |                                      |              | 111111                                       |      |                  | S                            | ГАТЕ В   | FCIS  |                 |            |      |        |      |       |
|                                 |                                      | PRESENT USE: |  |      | В                | STATE REGISTRATION: PROPOSEI |          |       | D LICE.         |            |      |        |      |       |
| LOT                             | BLOCK                                |              | PRESE  | NI   |                  |                              |          |       | PKU             | POSED      | USE: |        |      |       |
| FOLIO NUMBER:<br>NO. OF STORIES |                                      | OFFIC        | TEC.   |      | SUBDIV<br>FAMILI |                              | N:       | DEE   | PROC            | MC.        |      | BAT    | ITC. |       |
|                                 | ADD                                  |              | <u>къ:</u><br>И 🗌                            |      | ALTER [          |                              | RED      | AIR [ |                 |            | LACE |        |      | HER 🗌 |
| TYPE OF WORK:<br>VALUE OF WORK: |                                      | NE           | <u>~                                    </u> | I    | ALIEK            | _                            | KEI      | AIK   |                 | KEI        | LACE | Ш      | 01   |       |
| Trades):                        | (Total all                           |              |  |      |                  | S                            | Q. FT: ( | ТОТА  | L)              |            | LIN  | EAR I  | FEET |       |
| DESCRIBE<br>WORK:               |                                      |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| WORK:                           |                                      |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
|                                 |                                      |              |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| ARCHITECT/ENGIN                 | NEER'S NAN                           | <u>1E</u>    |  |      |                  |                              |          |       |                 |            |      |        |      |       |
| ADDRESS:                        |                                      |              |  |      |                  |                              |          | 1     |                 |            |      |        |      |       |
| PHONE#                          |                                      |              | FAX#   |      |                  |                              |          |       | EMA             | AIL_       |      |        |      |       |

**MORTGAGE LENDER NAME:** 

## MORTGAGE LENDER'S ADDRESS:

APPROVED BY

| Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has been effected prior to the  |
|---|
| issuance of said permit and that all work be performed to meet the standards of all laws regulating construction in DADE COUNTY and the TOWN OF                     |
| SURFSIDE whether specified in this application and accompanying plans or not. I understand that a separate permit must be secured for ELECTRICAL,                   |
| PLUMBING, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, etc. The information provided herein by the Applicant is                               |
| not evaluated for issuance of a Certificate of Use. The City reserves the right to deny or condition any proposed use of the property pursuant to provisions of the |
| City's Code of Ordinances.  |

| Initial this Page:_ | <br>- |  |
|---------------------|-------|--|
|                     |       |  |

**OWNER'S AFFIDAVIT:** I certify that all information provided is accurate, and that all work will be performed in compliance with all applicable laws regulating construction and zoning. No work has been commenced prior to the issuance of the permit applied with this application, and all work will be done as indicated in the Application and all accompanying document and plans.

**NOTICE:** In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of the county, and there may be additional permits required from other governmental entities such as water management districts, state or federal agencies.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING A NOTICE OF COMMENCMENT.

| CONTRACTOR: (Print Name):   | OWNER: (Print Name):   |
|---|--|
| SIGNATURE STATE OF FLORIDA COUNTY OF  | SIGNATURE:  STATE OF FLORIDA COUNTY OF                             |
| Sworn to (or affirmed) and subscribed before me this day of , 20 by           | Sworn to (or affirmed) and subscribed before me this day of, 20 by |
| NOTARY: SEAL:   | NOTARY:  SEAL:   |
| Personally known OR Produced Identification                                   | Personally knownOR Produced Identification                         |
| Type of Identification Produced   | Type of Identification Produced                                    |
| The Permit is not valid until signed by an authorized representative of paid. | the TOWN OF SURFSIDE BUILDING DEPT. and all fees are               |
| ACCEPTED BY   |  |

## Notice to Permit Applicants:

- 1. Applications requiring structural review will be forwarded to a Professional Engineer/Miami-Dade Structural Plans Examiner. The engineer fee is \$100 per hour and the fee will be due and payable at the time of permit issuance. This is applicable to the structural portion of the review only.
- 2. If the work exceeds \$2500 (or heating/air conditioning repair/replacement of \$7500 or more) a certified copy of the recorded Notice of Commencement must be filed with the Building Department. Receipt of the notice will not affect the issuance of the permit but inspections may not be performed until and unless a certified copy of the recorded notice has been provided.

For additional information regarding the Notice of Commencement, please see Florida Statues Chapter 713 Part One.

| Name of Permit Applicant (owner or contractor) |  |  |  |  |  |
|--|--|--|--|--|--|
| Signature of Permit Applicant                  |  |  |  |  |  |
| Date   |  |  |  |  |  |

## Sec. 14-30. BOND REQUIRED OF PERMIT APPLICANTS.

Prior to the issuance of any permit provided in this article, a cash or surety bond shall be deposited by the applicant for a permit with the town clerk as a guarantee that all town property damaged by the applicant or any contractor, materials suppliers or subcontractors under his supervision will be repaired to its original condition, and that the premises will be properly cleaned up and left in a sightly condition after the work has been completed.

The town manager, at his sole discretion, may require or waive the requirement of such bond; provided, however, that the amount of such bond shall not exceed five percent of the cost of the construction or demolition except that on work under \$10,000.00 in cost, a bond of up to \$500.00 may be required.

On application, any cash bond shall be refunded, or surety bond returned, when final inspection by the building inspector certifies that the conditions of the bond have been complied with; otherwise, as much of the principal amount of the bond as may be necessary shall be retained by the town and used to defray the expenses of cleaning up the premises or for repairs to damaged town property, which shall be done by the town.

In any event, if application for refund of a cash bond is not made within six months of the date of the final building inspection, the bond will be forfeited to the town. (Code 1960, § 6-7)

## **EDITED BY THE BUILDING OFFICIAL FOR CLARIFICATION**

Bonds are required for the following types of projects:

1-Roofing 5-Remodeling 2-Driveways 6-Alterations 3-Concrete restoration 7-Demolitions

4-Additions 8-As deemed require by the Building Official